



## **GEORGIA STATE BOARD OF BARBERS**

**237 Coliseum Drive**

**Macon, Georgia 31217**

**Phone (478) 207-2440**

**[www.sos.ga.gov/plb/barber](http://www.sos.ga.gov/plb/barber)**

### **APPLICATION FOR BARBER SCHOOL LICENSE**

Please review this application package and complete all the attached forms. Submit the requested documents along with the application and fee.

Any person desiring to operate a school of barbering in the State of Georgia is required to make application for a license to operate the school and meet all requirements of the laws and rules of the Georgia State Board of Barbers before a license can be issued. A list of the state laws and board rules may be found at [www.sos.ga.gov/plb/barbers](http://www.sos.ga.gov/plb/barbers). When the application is properly completed and returned to the Georgia State Board of Barbers, it shall be accompanied by the following:

- (a) Application fee - \$300.00 (non-refundable)
- (b) three (3) letters of references from persons who have known you for at least five years;
- (c) a professional blueprint of the floor plan of the proposed premises drawn to the approximate scale of 2,000 feet, showing the arrangement of the classrooms, locker space, separate restroom facilities for male and female students, approximate placing of equipment, the entrances and exits, ventilation and lighting, and adequacy of floor space;
- (d) list of various items of equipment to be used;
- (e) copies of licenses of each of the instructors who will work in the school and letters from those instructors stating their intentions to work at the school;
- (f) a copy of the completed Non Public Post Secondary Education Commission Surety Bond application; and,
- (g) a copy of receipt of payment for the Tuition Guaranty Trust Fund.

Submit application in a 9x12 or larger envelope. Do not staple pages or check/money order. Do not fold pages of the application.

When the application and the documents have been submitted to the Board office, an appointment will be scheduled for the Board to meet the applicant(s). The Board will conduct an interview with the applicant(s) concerning issues of ownership and licensure for a school certification in the State of Georgia. A preliminary inspection and final inspection may be required.

The Barber Board will approve or disapprove the application according to the laws and rules pertaining to the practice of barbering and ownership of a school. The Board will have a reasonable amount of time to make a decision concerning any application submitted to the board. Finally, no school application will be approved by the Board without a copy of the Surety Bond or any of the required documents.

FOR BOARD USE ONLY	
Amount Submitted	_____
Date	_____
Receipt #	_____



FOR BOARD USE ONLY	
Certificate Number	_____
Date Issued	_____
Applicant No.	_____

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 237 Coliseum Drive • Macon, Georgia 31217 • (478) 207-2440  
[www.sos.ga.gov/plb/barber](http://www.sos.ga.gov/plb/barber)

### APPLICATION FOR BARBER SCHOOL LICENSE

Any person desiring to operate a barber school in the State of Georgia is required to make application and meet all requirements of the laws and rules of the Board before a license can be issued. The application must be correct and complete with required documents and fee in the amount of **\$300.00** attached. Refer to state laws and Board rules found on the Board's website: [www.sos.ga.gov/plb/barber](http://www.sos.ga.gov/plb/barber).

NAME OF SCHOOL:

\_\_\_\_\_

Physical Address:

\_\_\_\_\_

Number and Street (P.O. Box not acceptable)                      City / State / Zip

Mailing Address (If different):

\_\_\_\_\_

Number and Street Number                      City/State/Zip

\_\_\_\_\_

Telephone Number                      Email\*                      Fax

**\*Acknowledgement of your application will be sent by email. Also, if further information is needed, email is the most efficient way for Board staff to contact you so that your application can be processed in the most efficient manner. Your email will not be shared with third parties.**

NAME(S), ADDRESS, EMAIL ADDRESS, AND RESIDENT TELEPHONE  
NUMBER OF EACH OWNER(S)

(1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

(2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

(3) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

\*If the owner is a corporation – list all officers of the corporation including the registered agent, chief operations officer, secretary, and treasurer with addresses, telephone numbers, and email addresses.

Have you ever been convicted of a felony or misdemeanor (other than minor traffic violation) or entered a plea of guilty, nolo contendere or under the “First Offender Act,” or been sanctioned by another board or agency? DUI and DWI are not minor traffic violations. ☐ Yes ☐ No

**If you answered “Yes” to the question regarding court convictions, you must submit to the Board the following: a) a certified copy of conviction/sentencing document(s) from the Court before which you were convicted and sentenced, signed by the presiding judge, and showing said conviction and sentence; AND, if applicable, b) a statement (on official letterhead) from your probation / parole officer regarding your current status/completion of any probation / parole. Your application will not be processed until this information is received and reviewed by the Board.**

Have you ever had a license revoked, suspended, or otherwise sanctioned by any professional licensing board or agency, or have you ever been denied issuance of, or pursuant to disciplinary proceedings refused renewal of a license by any professional licensing board or agency in Georgia or any other state? ☐ Yes ☐ No

**If you answered “Yes” regarding sanctions from another board, you must request that the licensing board or agency send a certified copy of the action taken against your license with relevant supporting documents to the Board’s office. Your application will not be processed until this information is received and reviewed by the Board.**

Have you ever owned or operated a school in Georgia? ☐ YES ☐ NO. If yes, please give the school name, license number, address, and date of operation:

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The following documents are attached for the Barber Board to review:

- (a) three (3) letters of references from persons who have known you for at least five years;
- (b) a professional blueprint of the floor plan of the proposed premises drawn to the approximate scale of 2,000 feet, showing the arrangement of the classrooms, locker space, separate restroom facilities for male and female student, approximate placing of equipment, the entrances and exits, ventilation and lighting, and adequacy of floor space;
- (c) list of various items of equipment to be used;
- (d) copies of instructor's licenses and letters from the instructor(s) stating their intentions to work at the school;
- (e) proof of Surety Bond approved by Non Public Post Secondary Education Commission (copy of bond);
- (f) copy of receipt of payment for Tuition Guaranty Trust Fund

The Nonpublic Postsecondary Educational Institutions Act of 1990 requires that before beginning operations, proprietary schools (including those with programs which must be approved and regulated by licensing boards of the Georgia Secretary of State) shall obtain certificates of authorization to operate from the Nonpublic Postsecondary Education Commission (NPEC). The school should complete all application forms and supporting documentation for submission to NPEC. The forms should be completed and any questions should be directed to the Deputy Director of NPEC:

Nonpublic Postsecondary Education Commission  
2082 East Exchange Place  
Suite 220  
Tucker, Georgia 30084  
Telephone: (770) 414-3300  
[www.gnpec.org](http://www.gnpec.org)

The forms and exhibits along with a letter from an insurance agency or bonding company certifying that school owner is qualified to secure the required bond should be forwarded to the Deputy Director of NPEC. **The NPEC initial application processing fee must be submitted to NPEC with the completed application package. Check the NPEC fee schedule or call the NPEC Deputy Director to determine the amount.** Applications and the list of documents and exhibits to be submitted may be found on the NPEC website ([www.gnpec.org](http://www.gnpec.org)) under the link entitled **"Forms and Instructions for New and Renewal Authorizations."**

Georgia State Board of Barber laws, rules and policies may be found on our website at [www.sos.ga.gov/plb/barber](http://www.sos.ga.gov/plb/barber). School licensure requirements and other information may also be found on this website.

**APPLICANT AFFIDAVIT:**

I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Barbers and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1:

1) \_\_\_\_\_ I am a United States citizen 18 years of age or older. Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on pages 6 & 7 of this application.

2) \_\_\_\_\_ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.

In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia State Board of Barbers and/or criminal prosecution.

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Print Applicant's Name

Personally appeared before me, the undersigned official authorized to administer oaths, comes

\_\_\_\_\_ who deposes and swears that he/she is the person who executed this  
(Applicant's Name)  
application for a license by examination for Barbers in the State of Georgia; and that all of the statements herein  
contained are true to the best of his/her knowledge and belief.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_

Notary Public Signature \_\_\_\_\_  
County State

My Commission Expires \_\_\_\_\_

(seal)

**APPLICANT: PLEASE CHECK THE FORM OF IDENTIFICATION BELOW THAT YOU POSSESS. RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.**

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**Name**

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2  
Issued August 1, 2011 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

\_\_\_\_\_ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:  
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm>  
[O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

\_\_\_\_\_ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

- \_\_\_\_\_A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- \_\_\_\_\_A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- \_\_\_\_\_A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3); 22 CFR § 41.2]
- \_\_\_\_\_A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- \_\_\_\_\_A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- \_\_\_\_\_A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- \_\_\_\_\_In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36- 2(c)]

**SAMPLE**  
**PRELIMINARY INSPECTION**  
**BARBER SCHOOL**

NAME OF SCHOOL: \_\_\_\_\_

ADDRESS OF SCHOOL: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

OWNER OF SCHOOL: \_\_\_\_\_

OWNER'S HOME ADDRESS: \_\_\_\_\_

OWNER'S HOME TELEPHONE: \_\_\_\_\_

OWNER'S EMAIL: \_\_\_\_\_

SCHOOL PROPERLY LIGHTED AND WELL VENTILATED: \_\_\_\_\_

PROPER HEAT AND AIR CONDITIONING: \_\_\_\_\_

DOES LOCATION HAVE PROPER ENTRANCE AND EXIT: \_\_\_\_\_

ADEQUACY OF FLOOR SPACE: \_\_\_\_\_

SIZE OF CLASS ROOMS: THEORY \_\_\_\_\_ PRACTICAL \_\_\_\_\_

CONDITION OF BUILDING: \_\_\_\_\_

TYPE OF PARKING FACILITIES AVAILABLE: \_\_\_\_\_

BUILDING IS OR IS NOT READY FOR INSTALLATION OF EQUIPMENT: \_\_\_\_\_

REMARKS: \_\_\_\_\_

INSPECTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_



## **SAMPLE - FINAL INSPECTION REPORT**

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME OF SCHOOL: \_\_\_\_\_ OWNER(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

		<u>YES</u>	<u>NO</u>
1.	Entrance and Exit Signs -----→	_____	_____
2.	Sign denoting SERVICE BY STUDENTS ONLY-----→	_____	_____
3.	Sign prohibiting pets (except guidance animals)-----→	_____	_____
4.	Adequate floor space of 2,000 square feet-----→	_____	_____
5.	Sixteen (16) workstations with mirrors for each individual student----→	_____	_____
6.	Adequate ventilation-----→	_____	_____
7.	Proper lighting-----→	_____	_____
8.	Sanitary regulations posted-----→	_____	_____
9.	Sufficient chalk boards-----→	_____	_____
10.	Audio visual aids-----→	_____	_____
11.	Sixteen (16) kits and one (1) each for additional students-----→ (NOTE: Each kit must contain a fumigant)	_____	_____
12.	One (1) wet sterilizer for each work station -----→	_____	_____
13.	One (1) dry sterilizer per four (4) work stations -----→	_____	_____
14.	Adequate locker space for each student-----→	_____	_____
15.	Ten (10) towels per student-----→	_____	_____
16.	Metal filing cabinet for records-----→	_____	_____
17.	Sixteen (16) mannequins; one (1) for each additional (5) students-----→	_____	_____
18.	Covered, washable container for garbage-----→	_____	_____
19.	Clean linen in closed cabinets-----→	_____	_____
20.	Facilities for clean drinking water-----→	_____	_____
21.	Hot and cold running water-----→	_____	_____
22.	Seven (7) hair dryers; additional dryer for each (5) additional students→	_____	_____
23.	One (1) shampoo basin per work station	_____	_____
24.	Separate restroom facilities for male and female students-----→	_____	_____

## LIBRARY FOR BARBER SCHOOLS (REQUIRED)

		<u><b>YES</b></u>	<u><b>NO</b></u>
1.	Medical Dictionary-----→	___	___
2.	First Aid-----→	___	___
3.	Primary Art and Sketching, etc.-----→	___	___
4.	History Book on Hair Styles-----→	___	___
5.	Theory and Practice of Esthetics -----→	___	___
6.	Business Management-----→	___	___
7.	Basic Nutrition and Basic Hormones-----→	___	___
8.	Theory and Practices of Barbering -----→	___	___
9.	Personality and Charm-----→	___	___

Name of Instructor(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of Days Each Instructor will teach: \_\_\_\_\_

Number of Hours Each Instructor will teach: \_\_\_\_\_

**Remarks**

**(General)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Inspector

\_\_\_\_\_  
Signature of Board Member